

PTO/SB/05 (08-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Please type a plus sign (+) inside this box → ☐

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. P-3849-US  
First Inventor or Application Identifier SAGIV, Amir  
Title **SYSTEM AND METHOD FOR NOISE APPROXIMATION**  
Express Mail Label No.

See MPEP chapter 600 concerning patent application contents

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

JC979 U.S. PTO  
10/086632  
03/04/02

**APPLICATION ELEMENTS**

1. ☒ \* Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)

2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.

3. ☒ Specification [Total Pages 17]  
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the invention
- Brief Summary of the invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 5]

5. ☒ Oath or Declaration [Total Pages 3]

- ☒ Unexecuted (original or copy)
- ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 16 completed)
- ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

- a. ☐ Computer Readable Form (CRF)
- b. ☐ Specification Sequence Listing on:
  - i. ☐ CD-ROM or CD-R (2 copies); or
  - ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))

10. ☐ 37 C.F.R. §3.73(b) Statement (when there is an assignee) ☐ Power of Attorney

11. ☐ English Translation Document (if applicable)

12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations

13. ☐ Preliminary Amendment

14. ☐ Return Receipt Postcard (MPEP 5303)  
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)

16. ☒ Other: Postcard

17. ☐ If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_/\_\_\_\_\_  
Prior application information: Examiner Group/Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

☐ Customer Number or Bar Code ☐ or ☒ Correspondence address below

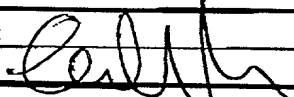
Name Elfan, Pearl, Latzer & Cohen-Zedek

Address One Crystal Park, Suite 210, 2011 Crystal Drive

City Arlington State VA Zip Code 22202-3709

Country USA Telephone (703) 486-0600 Fax (703) 486-0800

Name (Print/Type) Caleb Pollack Registration No. (Attorney/Agent) 37,912

Signature  Date 4 March 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

03/04/02

1138 U.S. PTO

PTO/SB/17 (08-00)

Approved for use through 10/31/2002 OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

Complete if Known

Application Number	
Filing Date	
First Named Inventor	SAGIV, Amir
Examiner Name	
Group / Art Unit	
Attorney Docket No.	P-3849-US

TOTAL AMOUNT OF PAYMENT (\$)

JC979 U.S. PTO  
10/086632  
03/04/02**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge
- 
- Indicated fees and credit any over payments to.

Deposit Account Number 05-0649  
 Deposit Account Name Eltan, Pearl, Latzer & Cohen-Zedek

- ☒
- Charge Any Additional Fee Required
- 
- Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status  
See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other
**FEE CALCULATION****BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
740	201	370	Utility filing fee	
330	206	166	Design filing fee	
510	207	255	Plant filing fee	
740	208	370	Reissue filing fee	
160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$)

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from Below	Fee Paid
20** =	X		
Independent Claims	3** =	X	
Multiple Dependent	X		

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description
103	18	203	9 Claims in excess of 20
102	84	202	42 Independent claims in excess of 3
104	280	204	140 Multiple dependent claim, if not paid
109	84	209	42 **Reissue independent claims over original patent
110	18	210	9 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65 Surcharge - late filing fee or oath	
127	50	227	25 Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130 Non-English specification	
147	2,520	147	2,520 For filing a request for ex parte reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	400	216	200 Extension for reply within second month	
117	920	217	460 Extension for reply within third month	
118	1,440	218	720 Extension for reply within fourth month	
128	1,960	228	980 Extension for reply within fifth month	
119	320	219	160 Notice of Appeal	
120	320	220	160 Filing a brief in support of an appeal	
121	280	221	140 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,280	241	640 Petition to revive - unintentional	
142	1,280	242	640 Utility issue fee (or reissue)	
143	480	243	230 Design issue fee	
144	820	244	310 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Petitions related to provisional applications	
126	160	126	160 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	740	246	370 Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	249	370 For each additional invention to be examined (37 CFR 1.129(b))	
179	740	279	370 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

**SUBMITTED BY**

Complete (if applicable)

Name (Print /Type)	Caleb Pollack	Registration No. (Attorney/Agent)	37,912	Telephone	(703) 486-0600
Signature		Date	March 4, 2002		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.